



Time: Date: / / Location:

Please scan QR code to request an appointment & upload your referral. Our staff will contact you to make an appointment.
www.heartscope.com.au/bookings

BULK BILLING AVAILABLE

Please bring your Referral form, Medicare card / DVA card / Concession card & Medications list with you.
 Medical practitioners can request our services online via www.heartscope.com.au/referral.

Patient Details

Bookings Call: (03) 9560 7558 or 1800 202 111 Fax: (03) 8669 4575

Name: _____ Date of birth: _____ Gender M / F: _____
 Address: _____ Telephone (H): _____ Height: _____
 Telephone (M): _____ Weight: _____
 Medicare No: _____ BMI: _____

Services Requested
 Tick Service Box In Bottom Section

Clinical Details

Referring Doctor Details

(Please Tick Appropriate Boxes Below)

Hypertension Arrhythmia Palpitations Syncope
 Chest Pain Stroke / TIA Diabetes High Cholesterol
 Asthma Chronic Dyspnea COPD CVD
 Bronchitis Chronic Cough Pre-Op SOB

Results

Fax Report
 Electronic Report

Category

Bulk Billed
 Private

Doctor Signature

Date
 (Mandatory)

Copies to

You MUST tick the appropriate indications below for Echo & Stress Echo. They can only be claimed once within a 2-year period. If a repeat is performed within this time period the patient may incur a non-rebateable charge. These patients can be referred to our cardiologists for consultation.

Cardiac Services

1. Cardiologist Consultation

A General **B** Interventional
 C Atrial Fibrillation (AF) & Arrhythmia Clinic
 D CT Coronary Angiogram (CTCA)
 Calcium Score Test (Tick If Required)

2. Echocardiogram (TTE)

Initial - Suspected Heart Condition (55126)
 Can only be Bulk Billed once every 2 years

For echocardiogram please select indications

- Symptoms or signs of heart failure
- Ventricular hypertrophy or dysfunction
- Pulmonary hypertension
- Valvular disease
- Pericardial disease
- Aortic disease
- Congenital heart disease
- Cardiac tumour or thrombus
- Cardiac source of embolus
- Frequent Repeat** - Isolated pericardial effusion, pericarditis, commenced medication for non-cardiac purposes that have cardio toxic side effects (55133)

3. Stress Echocardiogram

Can only be Bulk Billed once every 2 years

Exercise Stress Echo Focused Study (55141)
 Dobutamine Stress Echo (55145) (Privately Billed)

For stress echo please select indications below

- New typical or atypical angina
- Known coronary disease with symptoms suggestive of ischaemia
- Abnormal resting ECG ? ischaemia
- Shortness of breath on exertion (SOBOE)? Cause
- Indeterminate lesion on CTCA
- Pre-operative with poor exercise capacity & PHx of IHD, CVA, DM on insulin, or serum Cr >170
- Assessment of valvular disease or ischaemic threshold during exercise prior to intervention
- ? ischaemia in patient with impaired cognition or expressive language skills

4. 24 hour ECG Holter Monitor (11716)
 Can only be Bulk Billed once per every 4 weeks

5. 24 hour BP Monitor (Privately Billed)

6. ECG Tracing & Formal Report (11704)

Sleep & Respiratory Services

7. Lung Function Test (15 years & older)
 (Combined Spirometry & Gas Transfer Factor)

8. Sleep & Respiratory Consultation
 (Privately Billed)

9. Sleep Investigation (18 years & older)
 Home based sleep study (MBS 12250)
 Claimable once per year
 For suspected sleep apnea. If deemed necessary, a Sleep Physician appointment may be arranged, who will arrange appropriate treatment if required.

PLEASE TURN PAGE OVER FOR QUALIFYING QUESTIONNAIRES & PLEASE SEND BOTH SIDES

Note: Questionnaires - Patient & doctor details must be completed on back of referral for Medicare Bulk-Billing / Rebate.



Scan QR code for information on preparing for your medical procedure
www.heartscope.com.au/prepare

Your Doctor has recommended that you use Heartscope. You may choose another provider, but please discuss this with your doctor first.

- | | | | | | |
|--|---|---|---|---|---|
| <input type="checkbox"/> Dr Ali Al-Fiadh
MBChB, PhD (Uni.Melb),
FRACP, FESC, FCSANZ | <input type="checkbox"/> Dr Dimuth De Silva
MBBS, FRACP, FCSANZ | <input type="checkbox"/> Dr Kiran Munnur
MBBS, FRACP, PhD | <input type="checkbox"/> Dr Kon Profitis
MBBS, FRACP | <input type="checkbox"/> Dr Rafi Huq
MBBS (Monash),
FRACP, FCSANZ | <input type="checkbox"/> Dr Madhu Gopalakrishnan
MBBS, MD, DM, MBA, FACP, FRACP |
| <input type="checkbox"/> Dr John Voukelatos
MBBS, FRACP | <input type="checkbox"/> Dr Pavithra Naidu
MBBS, FRACP | <input type="checkbox"/> A/Prof Sandeep Prabhu
MBBS (Hons), LLB (Hons),
FRACP, PhD | <input type="checkbox"/> Dr Ravi Iyer
MBBS, FRACP | <input type="checkbox"/> Dr Ai Vee Ng
MBBS, FRACP | <input type="checkbox"/> Dr Arunavo Chatterji
MBBS, MD, DNB, FRCP, FRACP |
| <input type="checkbox"/> Dr Shahnaz Haque
MBBS, MRCP, FRACP | <input type="checkbox"/> Dr Hamna Sahi
MBBS, FRACP | <input type="checkbox"/> Dr Nizam Uddin
MBBS, FRACP | <input type="checkbox"/> Dr Peter Spencer
MBBS, FRACP | <input type="checkbox"/> Dr Hari Wimalaswaran
MBBS, B.Physio, CCPU, FRACP | <input type="checkbox"/> Dr Xun Li
MBBS, MD, AMC, FRACP |



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Suburb	Clinic Name	Address	Cardiologist Consultation	CT Coronary Angiogram	Stress Echocardiogram	Dobutamine Stress Echo	Echocardiogram	24 hr ECG Holter Monitor	24 hour BP Monitor	ECG	Lung Function Test	Home Based Sleep Study	Sleep Apnea Treatment	Respiratory/Sleep Consult
SOUTH EAST														
Wheelers Hill	Heartscope Wheelers Hill	G1, 202 Jells Rd, Wheelers Hill 3150	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Glen Waverley	Heartscope Glen Waverley	L1, Suite 11, 2 Brandon Park Dr, Glen Waverley				✓								
Dandenong	Heartscope Dandenong	40 Stud Rd, Dandenong 3175	✓	✓	✓	✓	✓	✓	✓	✓		✓		✓
Pakenham	Heartscope Pakenham	2 McGregor Rd, Pakenham 3810	✓	✓	✓	✓	✓	✓	✓	✓		✓		
Berwick	Heartscope / Marina Radiology	48 Kangan Dr, Berwick 3806		✓										
EAST														
Burwood	Burwood Specialist Centre	367 Warrigal Rd, Burwood 3125	✓	✓		✓	✓	✓						
Mooroolbark	Heartscope Mooroolbark	Unit 1, 96 Manchester Rd, Mooroolbark 3138	✓	✓		✓	✓	✓	✓					
NORTH														
Thomastown	Heartscope Thomastown	113 High St, Thomastown 3074	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Coolaroo	Heartscope Coolaroo	L1, Unit 103, 1510 Pascoe Vale Rd, Coolaroo 3048	✓	✓		✓	✓	✓	✓			✓		
WEST														
St Albans	Heartscope St. Albans	2 - 4 Collins St, St Albans 3021	✓	✓		✓	✓	✓	✓	✓	✓	✓		
Werribee	Heartscope Werribee	245 Heaths Rd, Werribee 3030	✓	✓		✓	✓	✓	✓	✓	✓	✓		
INNER CITY														
Balaclava	Heartscope Balaclava	336 Carlisle St, Balaclava 3183	✓	✓		✓	✓	✓	✓					
Moonee Ponds	Moonee Ponds Specialist Centre	827 Mt Alexander Rd, Moonee Ponds 3039		✓		✓	✓	✓	✓					

PLEASE FAX BOTH SIDES OF THE REFERRAL FORM

Patient Name DOB For Sleep Studies please complete questionnaires below

1 The Epworth Sleepiness Scale Test (Medicare Pre-Qualification Test)

SITUATION

Sitting and reading	0	1	2	3
Watching TV	0	1	2	3
Sitting, inactive in a public place (e.g. theatre or a meeting)	0	1	2	3
As a passenger in a car for an hour without a break	0	1	2	3
Lying down to rest in the afternoon, when circumstances permit	0	1	2	3
Sitting and talking to someone	0	1	2	3
Sitting quietly after lunch without alcohol	0	1	2	3
In a car, while stopped for a few minutes in traffic	0	1	2	3

- 0 - Would never doze
- 1 - Slight chance of dozing
- 2 - Moderate chance of dozing
- 3 - High chance of dozing

Score Result:
0 - 7 = Normal
 (Bulk billing not applicable)
8 - 24 = Abnormal
 (Complete questionnaire below)
Total =

How likely are you to doze off or fall asleep in the situations described, in contrast to feeling just tired?

 This refers to your usual way of life in recent times. Even if you haven't done some of these things recently, try to work out how they have affected you. Use the scale test on the left to choose the most appropriate number for each situation.

If your patient qualifies on the Epworth Sleepiness Scale test, please complete the Stop-Bang or OSA 50 Screening questionnaire below

2 STOP - BANG Sleep Apnea Questionnaire for Patient

- Do you **SNORE** loudly (loud enough to be heard through closed doors) ?
- Do you often feel **TIRED**, fatigued or sleepy during daytime ?
- Has anyone **OBSERVED** you stop breathing or choking during your sleep ?
- Do you have or are you being treated for high blood **PRESSURE** ?
- BMI** more than 35kg / m2 ?
- AGE** older than 50 years ?
- NECK** size large (**Males:** 43cm+ & **Females:** 41cm+) ?
- GENDER** = male ?

Minimum 3 Ticks To Qualify

OR OSA 50 Screening Questionnaire

- To Qualify for **Bulk-Billing** a patient must score **5 or more**
- Obesity** *Please Circle*
 Waist Circumference cm = **3**
 (Male > 102cm & Female > 88cm *Waist measurement at the umbilicus level)
- Snoring**
 Has your snoring ever bothered other people = **3**
- Apneas**
 Has anyone noticed that you stop breathing during sleep = **2**
- Age 50+**
 Are you aged 50 years or over ? = **2**
- Total Score / 10**

Doctor Signature Date